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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:
Michael Kenoyer et al.

Assignee: Polycom, Inc.

Serial No.: 10/814,364

Filed: March 31, 2004

For: System and Method for High Resolution
Videoconferencing

§ Group Art Unit: 2643
§
§ Examiner: unknown
§
§ Examiner phone: unknown
§
§ Atty. Dkt. No.: 199-0042US-C2
§
§
§

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In compliance with the duty of disclosure under 37 C.F.R. § 1.56, it is respectfully requested that this Information Disclosure Statement be entered and the documents listed on the attached Form PTO-1449 be considered by the Examiner and made of record. Copies of the referenced documents are included herewith.

In accordance with 37 C.F.R §§ 1.97(g),(h), this Information Disclosure Statement should not be construed as a representation that a search has been made, and is not to be construed to be an admission that the information cited is prior art or is considered to be material to patentability as defined in 37 C.F.R. § 1.56(b).

This Information Disclosure Statement is being filed prior to the receipt of a first Office Action reflecting an examination on the merits, and hence is believed to be timely in accordance with 37 C.F.R. § 1.97(b). Accordingly, no fee is believed to be due. Should any fees be deemed

Adjustment date: 02/17/2009 CKHLOK
01/07/2009 INTEFSW 00005520 501922 10014364
01 FC:1253 1110.00 CR

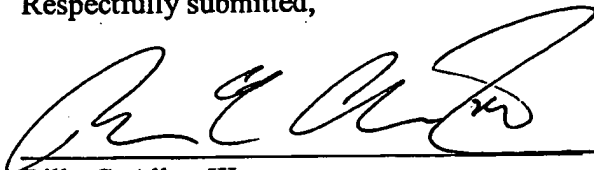
02/17/2009 CKHLOK 00000010 501922 10014364
01 FC:1453 1620.00 DA

necessary, however, the Commissioner is hereby authorized to charge any such fees to Deposit Account No. 501922, referencing attorney docket number 199-0042US-C2.

Applicant respectfully requests that the listed documents be considered and made of record in the present case, and that the Examiner initial the spaces on the accompanying Form PTO-1449 to evidence the same.

Respectfully submitted,

Dated: September 2, 2004



Billy C. Allen III
Reg. No. 46,147

Wong, Cabello, Lutsch,
Rutherford & Brucculeri, L.L.P.
20333 SH 249, Suite 600
Houston, Texas 77070
Phone: (832) 446-2400
Fax: (832) 446-2424

CERTIFICATE OF MAILING
37 C.F.R. 1.8

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria VA, 22313-1450, on the date below.

September 2, 2004
Date


Rebecca R. Ginn

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

| REQUEST FOR PATENT FEE REFUND | | | | | | | | | | | |
|---|-----------------------------------|-------------------------------------|---|----------|---|---|----|---|---|---|---|
| 1 Date of Request: <u>2/6/09</u> | | 2 Serial/Patent # <u>10/814,364</u> | | | | | | | | | |
| 3 Please refund the following fee(s): | | 4 PAPER NUMBER | 5 DATE FILED | 6 AMOUNT | | | | | | | |
| | Filing | | | \$ | | | | | | | |
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| | Petition | | | \$ | | | | | | | |
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| | Cert of Correction/Terminal Disc. | | | \$ | | | | | | | |
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| | | | 7 TOTAL AMOUNT OF REFUND | \$1,110 | | | | | | | |
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| | Duplicate Payment | Credit Deposit A/C #: | | | | | | | | | |
| <input checked="" type="checkbox"/> | No Fee Due (Explanation): | <input checked="" type="checkbox"/> | 9 <table border="1" style="display: inline-table; text-align: center; width: 150px;"> <tr><td>5</td><td>0</td><td>--</td><td>1</td><td>9</td><td>2</td><td>2</td></tr> </table> | | 5 | 0 | -- | 1 | 9 | 2 | 2 |
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| 11 REFUND REQUESTED BY: | | | | | | | | | | | |
| TYPED/PRINTED NAME: <u>Kimberly Inabinet</u> | | TITLE: <u>Petitions Examiner</u> | | | | | | | | | |
| SIGNATURE: <u><i>Kimberly Inabinet</i></u> | | PHONE: <u>x24618</u> | | | | | | | | | |
| OFFICE: <u>Office of Petitions</u> | | | | | | | | | | | |
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| APPROVED: <u><i>CKHOK</i></u> | | DATE: <u>2/17/09</u> | | | | | | | | | |

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: